PENNIE & EDMONDS ... DOCKET NO.

11038-153-999

DECLARATION FOR NON-PROVISIONAL PATENT APPLICATION

As a below named inventor, I hereby declare that;

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 ct seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

R	EAR	BUMPER	ASSEMBLY	STRUCTURE	FOR	VEHICLE			
and whiel	h pater	ıt applicatio	n bears attorney	docket no.	110)38 - 153-999	 	•	

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims.

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED	
10-2003-0075884	Korea	29/October/2003	YES ■	ио 🗖
			YES 🗆	ло 🗆

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME		
		LEE	JEONG-HO			
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	SIGNATURE OF INVE	DATE				
		December 27, 20				